

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------------|--------|----------|
| FEE DETERMINATION | <i>[Signature]</i> | | 08/06/01 |
| O.I.P.E. CLASSIFIER | A.S. | 943 | 8-21-1 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

Non-elected
Interference

| | | | |
|-------------------------|------------|---------|--------------|
| INDEX OF CLAIMS | | N | Non-elected |
| ✓ | Rejected | I | Interference |
| = | Allowed | A | Appeal |
| (Through numeral) | Canceled | O | Objected |
| ÷ | Restricted | | |

| Claim | | Date |
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| Final | Original | |
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| Claim | | Date | |
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| Claim | | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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